



*Naval Forces Japan/  
Navy Region Japan  
Pacific Homecoming Guide  
For  
Voluntary Authorized Departed  
Family Members*

*26 April 2011  
Version 2.0*

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## ***INTRODUCTION***

The purpose of this guide is to provide basic information to assist military and Department of Defense (DoD) civilian family members with procedures and information for repassage. Although each Eligible Family Member (EFM) will be faced with different circumstances, the information in this guide is meant to provide tools for overall planning and may be modified based upon specific circumstances and other authorities.

Understanding what steps to take to prepare for return to Japan will help to ease the anxiety and worry associated with this process. Applicable sections in this guide are referenced in both the Joint Federal Travel Regulations (JFTR) Chapter 6 for military families and the Joint Travel Regulation (JTR) Chapter 6 for DoD civilian families.

Suggestions from families, military members and civilian employees to better the content and delivery of this guide are always welcome. (Send questions or comments to: [ffscinfo@fe.navy.mil](mailto:ffscinfo@fe.navy.mil))

## SECTION I

### **ADVANCE PLANNING FOR REPASSAGE**

This section of the guide will talk about things you can do now to prepare for the return to Japan. Talk them over with your family and add anything else you think is important to the list.

#### **PERSONAL PAPERS**

Always keep important papers together in a safe place, and most importantly, up-to-date. Keep them in a separate container/briefcase so these documents will be ready at a moment's notice. Listed below are many, but not necessarily all of those important papers that you will need to hand carry from your current location to Japan:

- Valid, unexpired passport (with multiple exit/re-entry stamps) and/or visa
- Military identification card (military/civilian/family members)
- Authorized Departure Travel Orders & amendments-if any (Command issued Orders to the Sponsor)
- Will and Power of Attorney
- Medical and dental records, shot records, pharmacy prescriptions
- Insurance policies and financial papers/documents
- Pet records (to include the following):
  - The original rabies certificates for the two most recent rabies vaccinations.
  - Results for current fluorescent antibody viral neutralization (FAVN) test
  - Copy of approval for importation from the Japan Animal Quarantine Service
  - Veterinary health certificate for each pet (MDJ OP 2209 or USDA Certification)
- School records, transcripts, test scores, recommendations
- U.S. driver's license, auto insurance policies, car registration and title
- Cash in both U.S. and local currencies
- Birth certificate(s), naturalization certificate(s), adoption papers, marriage license
- Spouse's personal papers, resumes
- Household goods inventory list (pictures-digital or hard copy of possessions/furniture)
- Duplicate address book
- Listing of regular billing dates for all recurring expenses
- Listing of names, addresses, and phone numbers of doctors, dentist, lawyers, and other Professional services personnel
- CNFJ-CNRJ Pacific Homecoming Guide

## **FINANCES**

Family members should continue to talk about finances. For example, who will continue to pay the bills and will it be on-line or by check? This is of significant importance if the sponsor is separated from the family. If you (the spouse) currently work outside the home, do you intend to continue your employment upon returning to your military installation? How will this decision affect your family's income? The bottom line is families must work out now how to handle the money issues associated with returning to their military installations. This may be of special importance in those cases where the sponsor is deployed or separated from returning families. While most families paid for expenses up front, which family member will be responsible for initiating the reimbursement process? Be familiar with the reimbursement process, what expenses may or may not be covered and who will initiate it. Make preparations for the possibility that all expenses may not be covered at the time of reimbursement.

## **POWER-OF-ATTORNEY AND LEGAL MATTERS**

A child's well-being is always of concern during an emergency situation. In case you might be away at the time of an emergency you should have a Special Power-of-Attorney prepared. This will give someone on station the authority to make decisions on your child's behalf and to escort your child back on station if you are unable.

## **TRAVEL ORDERS**

Please carry with you the orders authorizing your departure from Japan. If you do not have these on hand, please obtain them from your sponsor.

## **PETS**

Veterinary Services are doing everything possible to make your pet's return to Japan smooth and stress-free. Remember: Pet entry is conditional. All paperwork must be up-to-date.

The following documents will be needed as you and your pet return to Japan:

1. The original rabies certificates for the two most recent rabies vaccinations.
2. Results for the most recent Fluorescent Antibody Viral Neutralization (FAVN) Test
3. Copy of the Approval for Import Notification received from the Japanese Animal Quarantine Service
4. Veterinary Health Certificate for each pet returning.
  - a. Military veterinarians issue MDJ OP 2209
  - b. Civilian veterinarians require USDA certification from a federal USDA veterinarian

## **SECTION II**

### **REPASSAGE GENERAL INFORMATION**

#### **PREPARING TO RETURN TO STATION (JAPAN)**

Effective April 15, 2011, the U.S. Department of State (DoS) lifted Voluntary Authorized Departures, allowing evacuated family members of the U.S. Military and Government employees to return to Japan. EFMs who departed under the authorized departure authority or were prevented from returning due to Stop Movement may now return.

If the evacuated family members' military sponsor is due to depart PCS within sixty (60) days of the evacuated Family Member's scheduled return date, the family members are not authorized to return, unless specifically authorized by the Secretary of the Navy (SECNAV). EFMs who departed under the Voluntary Authorized Departure are authorized Safe Haven allowances for up to 10 days from the date of the authorized departure termination. Sponsors are expected to make arrangements for their EFMs' travel to the new Permanent Duty Station (PDS) during that timeframe. EFMs may travel under the member's PCS Orders to the new PDS any time after the orders are issued.

There will be a designated person in your sponsor's command who is responsible for Repassage processing, including obtaining your airline tickets.

#### **FAMILY SUPPORT INFORMATION**

##### **The Family Assistance Center (FAC)**

During disasters, communication and accurate information are among the most critical elements in containing situations and providing the quickest possible recovery time. In partnership with the Public Affairs (PA) Office, the FAC can become a key link to provide communication and information in a centralized place through both personal contact and telephone information services.

The FAC is a one-stop shop for information, referral, and assistance. FAC provides a consolidated staging area where DoD families and individuals can obtain disaster relief assistance and/or support, current information from leadership, and contingency services. FAC is the central point for timely and accurate information dissemination. FAC integrates services addressing the needs of DoD families and individuals.

The Yokosuka FAC is located at the Community Readiness Center and when activated provides 24 hour/7-day phone response at: Comm US: 011-81-46-816-1728/1729/1730, DSN: 243-1728/243-1729/243-1730.

##### **FFSC Counseling Services:**

Fleet and Family Support Centers continue to offer individual, marital and family counseling upon request, with a goal of scheduling routine client appointments within three days of request. For appointments please call Yokosuka: 243-7878 Atsugi: 2644188; Misawa: 226-4735

## **FFSC Information and Referral Services:**

For translation assistance with addressing potential billing issues, or other support issues you can contact the Information and Referral (I &R) section at your FFSC. Yokosuka: 243-3372 Atsugi: 264-3628; Misawa: 226-4735

FFSC also offers Personal Financial Management consultation, to assist with financial concerns individuals may have to include establishing a budget and developing a savings plan for emergencies in the future.

## **Child Care Services:**

CDC and Youth Services waiting lists are not affected by the voluntary departure. No one will be penalized for not updating or being present for an offer during the departure period. You will not need documentation when you return with your child if you left with all documents currently on file as current. If documents become out of date prior to return, such as shot records, those will need to be updated in accordance with policy. Although the centers are and will be open, you should expect the possibility of limited services as the centers reincorporate staff members returning from the voluntary departure. For any specific questions, please contact your center. Yokosuka: 243-9186, Atsugi: 264-3524, Misawa: 226-4666

## **GUIDANCE ON HOUSING ELIGIBILITY (Yokosuka and Atsugi)**

a. On Base Housing. In general, Military Family Housing (MFH) eligibility continues as long as dependents are being paid evacuation allowances, and for sixty days beyond the date the allowances end if no dependents return to the permanent duty station (PDS) in Japan. Unless you have children enrolled in school at your safe haven location, your evacuation allowances will end on 25 April 2011. Therefore:

(1) If you do not have children enrolled in school, your MFH eligibility ends on 25 June 2011. Your dependents must return to Japan by 25 June, or your MFH assignment is subject to termination. You must check in with housing to ensure they know that your dependents have returned by 25 June to preclude termination action being taken.

(2) If you have children enrolled in school, your housing eligibility will continue through the date of their enrollment and continue for another 60 days after that period, or for 60 days after the date you are provided government paid transportation returning you to Japan, whichever is later - You must complete the Absence from Quarters form, see Appendix I, and return to the housing office to ensure you keep your housing eligibility. You must also check in with housing to ensure they know that your dependents have returned to preclude termination action being taken.

b. Off Base Housing. In general, Overseas Housing Allowances (OHA) continues until you request housing allowances elsewhere. Therefore, you are authorized to continue to reside in your present residence under the current lease until housing allowances are requested for another location.



c. Exceptions. There are two exceptions to the above:

(1) Early Return of Dependents (ERD): Members not in receipt of PCS orders may request Early Return of Dependents (ERD). Upon approval, eligibility for housing ends here in Japan. Sailors remaining in Japan are required to live in Bachelor Housing, if available. Bachelor Housing is considered available for all shipboard personnel because they have berthing on board their ship. Bachelor Housing may be available for shore duty personnel, and will be determined on a case-by-case basis by the Installation Bachelor Housing Office. If quarters are not available, members will receive a Certificate of Non-Availability (CNA) from the Installation Bachelor Housing Office in order to start receiving Family Separation Housing OHA (FSH-O) and be required to live off base.

(2) Member within 60 days of PRD: Dependents are not authorized to return to Japan if sponsor is within 60 days of PRD. These dependents are authorized to travel to and set up residence at the member's new PDS. Once the housing allowance at the dependents' location begins (the day the dependents move into a permanent residence), the member may become eligible for FSH-O provided there are no Bachelor Housing available at the installation. Bachelor Housing is considered available for all shipboard personnel because they have berthing on board their ship. Bachelor Housing may be available for shore duty personnel, and will be determined on a case-by-case basis by the Installation Bachelor Housing Office. If quarters are not available, members will receive a Certificate of Non-Availability (CNA) from the Installation Bachelor Housing Office in order to start receiving FSH(O) and be required to live off base.

## **RETURN TRANSPORTATION FOR VOLUNTARY DEPARTURE**

The Commanding Officer will ensure all sponsors are briefed on procedures and entitlements in accordance with Navy Regulations. Commanding Officers will make sure that Command PASS Coordinators (CPC) for military and civilian personnel receives all required information as soon as possible. The CPC will work with member and/or eligible family members to obtain necessary information required to complete return travel arrangement including authorized pets.

Please note that pet space will be limited per aircraft and all Japan-bound flights will be reserved to accommodate as many spaces for pets as allowed to ensure all passengers return as quickly as possible. **Family members/sponsors are required to contact the airline for confirmation of pet and other requirements needed once the flight itinerary is issued.** Remember that pet expenses are reimbursable and, therefore, must be paid for by the customer up front. Please plan accordingly for this expense.

## **TRAVEL CLAIM PROCESSING**

Upon return from voluntary departure a travel claim must be completed and submitted to the Travel Processing Center at Hampton Roads, VA. Detail information can also be found in Section III (Repassage Procedures) of this guide.

## PET INFORMATION

Upon arrival back to Japan please contact your Veterinary Treatment Facility as soon as possible to make an appointment to have your pet examined:

1. Camp Zama: 263-3875
2. Iwakuni MCA: 253-3588
3. Misawa AFB: 226-2773
4. Sasebo NB: 252-3585
5. Yokota AFB: 225-2143
6. Yokosuka NB: 243-6820

## NARITA AIRPORT SHUTTLE BUS INFORMATION (For Yokosuka & Atsugi)

Narita Shuttle Bus provides bus transportation for official travelers who need transportation to and from Narita International Airport and installations.

For Travelers' destination: **Yokosuka Base**

The bus runs three times a day to meet the needs of most official travelers.

Sign up for bus transportation by phone at DSN 243-7777/2287, Fax 243-9594, or [cfay\\_bus@fe.navy.mil](mailto:cfay_bus@fe.navy.mil)

From off base, the number is 046-816-7777/2287; from the U.S., 011-81-46-816-7777/2287. The Bus office is located on the first floor of the PSD building (1555). Office hours are 0730-1800 on regular weekdays, and 0900-1430 on weekends and holidays.

CFAY website includes an Online Sign-Up link for Space Available travelers who cannot readily contact the Bus Office.

<https://www.cnic.navy.mil/Yokosuka/Relocation/NaritaBusSignUp/index.htm>

Please note the **Rules and SOP** link within this site for the service.

The YCAT INFORMATION link within this site <https://www.cnic.navy.mil/Yokosuka/Relocation/NaritaBusSignUp/YCAT/index.htm> provides information for Negishi, Yokohama residents on how to use the Yokohama City Air Terminal limousine (bus) service to Narita International Airport.

For Travelers' destination: **Atsugi Base**

For shuttle bus sign up to NAF Atsugi contact info:  
DSN 315-264-3900/3563  
Commercial 011-81-467-63-3900/3563

Complete form listed as Form A (official orders) in following link and email  
to [M-AT-NAF-BUS@fe.navy.mil](mailto:M-AT-NAF-BUS@fe.navy.mil)

In order to make reservation, the copy of orders and the flight itinerary are required. For more information go to :  
<https://www.cnic.navy.mil/Atsugi/Living/BusSchedules/index.htm>

Note: The traveler must provide a copy of orders upon check-in at Narita. Without a copy of orders, the traveler will be designated space available, and seats are assigned categorically on a first come first serve basis.

## **MISAWA FAMILY MEMBER RETURNING VIA PATRIOT EXPRESS**

EFMs returning via the Patriot Express should have the following when checking in from Safe Haven location to Seattle AMC Terminal:

1. Dependant ID cards (AMC Terminal)
2. Evacuation Orders (AMC Terminal)
3. Passports (must not be expired) (AMC Terminal)
4. Flight Reservation CODE or Itinerary

Note:

SHOWTIME for Patriot Express may be six or more hours before flight departure. EFM's Sponsor should pass to EFMs the date, show time and departure time of flight.

USO and AMC terminal info for Seattle can be found at this link:  
<http://www.usopsa.org/index.php?content=seatac>

If EFMs cannot contact their sponsor for flight information, please email [nafm.vad.travel@fe.navy.mil](mailto:nafm.vad.travel@fe.navy.mil) and use "Patriot Express Flight Info Request for <family name>" in the subject line.

## **HRO INFORMATION**

Upon returning to the installation, civilian employees should contact their local HRO to update post allowance information by submitting a Foreign Allowances Application, Grant and Report (SF-1190) for Post (Hardship) Differential allowance. The form can be found at:  
<http://www.gsa.gov/portal/forms/download/C4CDCB65B27736CF85256A3F0043313E> .

Names of employee's family members away from installation need to be listed with the rest of information requested in Block#17 of SF-1190 form.

**For Yokosuka/Atsugi  
MWR/N9 Non Appropriated Fund (NAF) Personnel Office:**

MWR/CYP Military Dependents (and other dependent categories) Non Appropriated Fund Employees: When you are aware of the date you will be returning, please contact your immediate supervisor and provide your intended return to work date. If you want to resign, and are not present in Japan, please have your sponsor contact your immediate supervisor so that a resignation form can be completed or you may send an e-mail to your supervisor stating your intent to resign.

**For Yokosuka/Atsugi**

MWR/CYP Local Hire Sponsor Non Appropriated Fund (NAF) Employees, MWR/CYP Overseas Hire Employees, for questions, contact:

Atsugi: Arcelie Lloyd at 264-4657 or Maria Custodio at 264-3504.

Yokosuka: Kiyoko Yokota or Tess Arellano 243-1242 or 243-1240.

Navy Exchange employees will need to coordinate with the District Human Resource Office to complete any personnel actions necessary for your individual situation.

(1) All NEX Employees who return and wish to resume working for NEX will need to provide the District Human Resource Office with Official Documentation stating that they are authorized to return, an expected return date and contact information (Phone and/or E-mail Address).

(2) If you were an NEX Employee and resigned your position as part of the Voluntary Departure and would like to return to work at your Japan NEX location, please contact the District Human Resource Office to discuss the situation as you may still be able to return to work.

(3) If you decide that you will not return please notify the District Human Resource office with this intent, provide all contact information as the NEX will either assist you with out-processing and/or might be able to assist you in a transfer to an NEX in your new location.

\*\*\*For any questions regarding your NEX Position, please contact Mr. Dennis Bael at the NEX District Human Resource Office: [dennis.bael@nexweb.org](mailto:dennis.bael@nexweb.org) or by calling DSN: 241-4496, Local: 046-896-4496, From CONUS: 011-81-46-896-4496.

**DOD SCHOOL PROCEDURES**

Eligible Family Members (EFM) who departed with a command-sponsored school-aged EFM and enrolled that EFM in school at their Safe Haven location may remain with their school-aged EFM at their Safe Haven location until the completion of his or her current school semester (or equivalent academic period). Safe Haven allowances for these EFMs will terminate one day after the current school semester (or equivalent academic period) ends for their last command-sponsored dependent enrolled in school at his or her Safe Haven location.

## RETURN PROCESS FOR SCHOOL AGE CHILDREN:

### Students attending school in a Designated Alternate Location (DAL)

- (1) A parent or sponsor must contact the DoDEA school(s) at their Permanent Duty Station (PDS) (email, phone or sponsor may stop by the school office) and provide an anticipated return date to school for their child(ren).
- (2) A parent or sponsor must dis-enroll their child(ren) from the DAL school and request official transcripts, and “progress report” grades if necessary, be sent to the assigned DoDEA school(s) at the PDS. If possible, hand-carrying the student records is strongly encouraged.
- (3) Upon return to the PDS, students should return to their assigned DoDEA-Japan school as soon as possible and the parent or sponsor must provide the official transcripts and any supporting evidence of academic progress to school personnel.
- (4) High school students meet with guidance counselors.

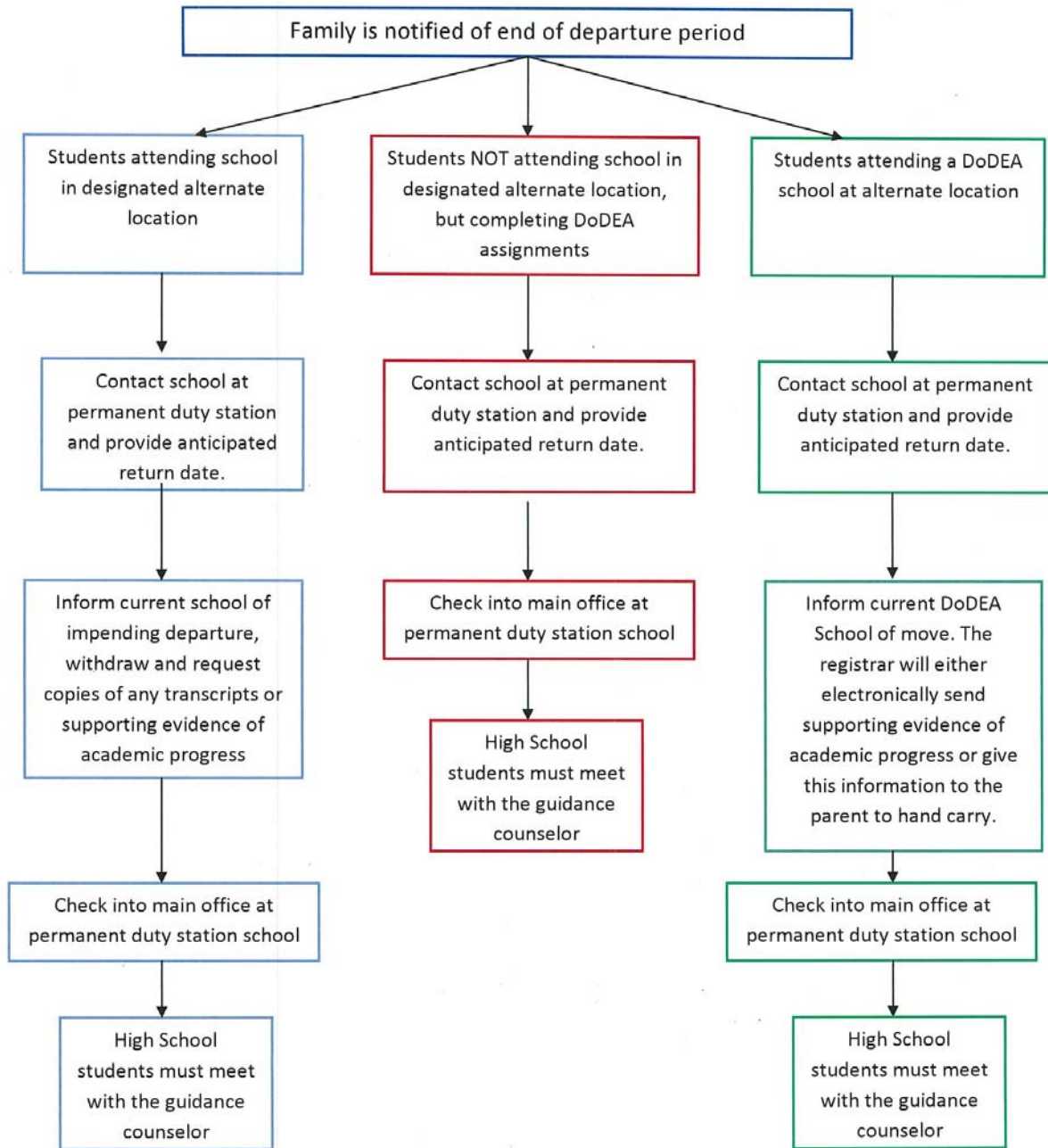
### Students NOT attending school in a designated alternate location, but completing DoDEA assignments

- (1) A parent or sponsor must contact the DoDEA school(s) at their PDS (email, phone or sponsor may stop by the school office) and provide an anticipated return date to school for their child(ren).
- (2) Upon return to the PDS, students should return to their assigned DoDEA-Japan school as soon as possible.
- (3) High school students meet with guidance counselor.

### Students who are attending a DoDEA school at alternate location

- (1) A parent or sponsor must contact the DoDEA school(s) at their PDS (email, phone or sponsor may stop by the school office) and provide an anticipated return date to school for their child(ren).
- (2) Please contact the registrar at the current DoDEA school. The registrar will either transfer the information electronically or provide you records to hand-carry back to the assigned DoDEA school at the PDS.
- (3) Upon return to the PDS, students should return to their assigned DoDEA-Japan school as soon as possible.
- (4) High school students meet with guidance counselor.

\*Homeschooling families using a curriculum other than DoDEA’s who wish to attend DoDEA schools upon return must submit records and documentation of work completed during the departure period and go through registration process if the student was not previously enrolled. Homeschooling families who do not wish to attend DoDEA schools need to take no action.



## **SCHOOL CONTACT INFORMATION**

Please send an email to your school with the following information:

1. Expected date your child will return to the school
2. First and last name of child
3. Grade of the child
4. Name and location of current school if attending school in alternate location

### **CFAY:**

#### **Kinnick High School.**

Principal Lorenzo Brown [Kinnick\\_Principal@pac.dodea.edu](mailto:Kinnick_Principal@pac.dodea.edu)  
DSN 243-7392/7393 From the U.S.: 011-81-6160-43-7392  
FAX: 243-7278 FAX from the U.S.: 011-81-6160-43-7278  
Email return information to [StudentStatus.KinnickHS@pac.dodea.edu](mailto:StudentStatus.KinnickHS@pac.dodea.edu)

#### **Yokosuka Middle School**

Principal Geoffrey Fong [principal\\_yokosukams@pac.dodea.edu](mailto:principal_yokosukams@pac.dodea.edu)  
DSN 243-5165 From the U.S.: 011-81-6160-43-7579  
FAX: 243-5563 FAX from the U.S.: 0468-21-1911/243-5563  
Email return information to [StudentStatus.YokosukaMS@pac.dodea.edu](mailto:StudentStatus.YokosukaMS@pac.dodea.edu)

#### **Sullivans School**

Principal Walter Wilhoit [principal\\_sullivan\\_es@pac.dodea.edu](mailto:principal_sullivan_es@pac.dodea.edu)  
DSN 243-7336 From the U.S.: 011-81-6160-43-7336  
FAX: 243-7865 FAX from the U.S.: 011-81-6160-43-7865  
Email return information to [StudentStatus.SullivansES@pac.dodea.edu](mailto:StudentStatus.SullivansES@pac.dodea.edu)

#### **Ikego Elementary**

Principal Scott Finlay [principal\\_ikegoes@pac.dodea.edu](mailto:principal_ikegoes@pac.dodea.edu)  
DSN: 246-8320/23 From the U.S.: 011-81-46-806-8320  
FAX: 246-8324 FAX from the U.S.: 011-81-468-06-8324  
Email return information to [StudentStatus.IkegoES@pac.dodea.edu](mailto:StudentStatus.IkegoES@pac.dodea.edu)

#### **Byrd Elementary**

Principal Gwen Baxter-Oakley  
DSN: 242-4815 From the U.S.: 011-81-45-281-4815  
FAX: 242-4870 FAX from the U.S.: 011-81-45-281-4870  
Email return information to [StudentStatus.ByrdES@pac.dodea.edu](mailto:StudentStatus.ByrdES@pac.dodea.edu)

### **NAF Atsugi:**

#### **Shirley Lanham Elementary**

Principal Dave Russell Email: [principal.lanhames@pac.dodea.edu](mailto:principal.lanhames@pac.dodea.edu)  
DSN: 264-3664/3261/3053 From the U.S.: 011-81-467-63-6010  
FAX: 264-4476 FAX from the U.S.: 011-81-467-634476  
Email return information to [maria.rodgers@pac.dodea.edu](mailto:maria.rodgers@pac.dodea.edu)

**Camp Zama:****Zama Middle School**

Principal: Ms. Denise Leach [principal\\_zamams@pac.dodea.edu](mailto:principal_zamams@pac.dodea.edu)  
DSN: 263-4040 From the U.S.: 011-81-3117-55-4040  
FAX: 263-4095 FAX from the U.S.: 011-81-3117-55-4095  
Email return information to [principal\\_zamams@pac.dodea.edu](mailto:principal_zamams@pac.dodea.edu)

**Zama High School**

Principal: Ms. Candice Wojciechowsky [principal\\_zamahs@pac.dodea.edu](mailto:principal_zamahs@pac.dodea.edu)  
DSN: 263-3181/4040 From the U.S.: 011-81-3117-63-3181  
FAX: 263-3826 FAX from the U.S.: 011-81-3117-63-3826  
Email return information to [StudentStatus.ZamaHS@pac.dodea.edu](mailto:StudentStatus.ZamaHS@pac.dodea.edu)

**Arn Elementary**

Principal: Ms. Sue Morin [PRINCIPAL\\_\\*ARNNES@pac.dodea.edu](mailto:PRINCIPAL_*ARNNES@pac.dodea.edu)  
DSN: 267-6602 From the U.S. 011-81-428-69-6602  
FAX: 267-6015 FAX from the U.S.: 011-81-428-69-6015  
Email return information to [StudentStatus.ArnnES@pac.dodea.edu](mailto:StudentStatus.ArnnES@pac.dodea.edu)

**Misawa AB:****Edgren High School**

Principal: Ms. Georgia Watters [PRINCIPAL\\_\\*Edgren\\_HS@pac.dodea.edu](mailto:PRINCIPAL_*Edgren_HS@pac.dodea.edu)  
Phone: 226-4377/3351 From the U.S.: 011-81-3117-66-4377/3351  
FAX: 222-7982 FAX from the U.S.: 011-81-3117-62-7982  
Email return information to [StudentStatus.EdgrenMHS@pac.dodea.edu](mailto:StudentStatus.EdgrenMHS@pac.dodea.edu)

**Sollars Elementary**

Principal: Ms. Dana Stedman-Chandler [PRINCIPAL\\_\\*SOLLARSES@pac.dodea.edu](mailto:PRINCIPAL_*SOLLARSES@pac.dodea.edu)  
DSN: 226-3933/4195 From the U.S.: 011-81-3117-66-3933/4195  
FAX: 222-5071 FAX from the U.S.: 011-81-3117-62-5071  
Email return information to [StudentStatus.SollarsES@pac.dodea.edu](mailto:StudentStatus.SollarsES@pac.dodea.edu)

**Cummings Elementary**

Principal: Mr. Scott Sterry [pcumming@pac.dodea.edu](mailto:pcumming@pac.dodea.edu)  
DSN: 226-2647/2226 From the U.S.: 011-81-3117-66-2647  
FAX: 222-5110 FAX from the U.S.: 011-81-3117-62-5110  
Email return information to [StudentStatus.CummingsES@pac.dodea.edu](mailto:StudentStatus.CummingsES@pac.dodea.edu)

**Yokota AB:****Joan K. Mendel Elementary**

Principal: Ms. Hattie Phipps [Principal.Mendel@pac.dodea.edu](mailto:Principal.Mendel@pac.dodea.edu)  
Phone: 225-5204/5503/5504 From the U.S.: 011-81-3117-55-5204  
FAX: 225-5502 FAX from the U.S.: 011-81-3117-55-5502  
Email return information to [StudentStatus.MendelES@pac.dodea.edu](mailto:StudentStatus.MendelES@pac.dodea.edu)



**Yokota High School**

Principal: Mr. Darrell Mood [PRINCIPAL\\_\\*YOKOTAHS@pac.dodea.edu](mailto:PRINCIPAL_*YOKOTAHS@pac.dodea.edu)

DSN: 225-7018/7019 From the U.S.: 011-81-3117-55-7018/7019

FAX: 225-7223 FAX from the U.S.: 011-81-3117-55-7223

Email return information to [StudentStatus.YokotaHS@pac.dodea.edu](mailto:StudentStatus.YokotaHS@pac.dodea.edu)

**Yokota Middle School**

Principal: Ms. Mary Leinard [YMiddleP@pac.dodea.edu](mailto:YMiddleP@pac.dodea.edu)

DSN: 225-9671 From the U.S.: 011-81-3117-55-9671

FAX: 225-3091 FAX from the U.S.: 011-81-3117-55-3091

Email return information to [StudentStatus.YokotaMS@pac.dodea.edu](mailto:StudentStatus.YokotaMS@pac.dodea.edu)

**Yokota West Elementary**

Principal: Ms. Sharon Carter [principal\\_\\*yokota\\_west\\_es@pac.dodea.edu](mailto:principal_*yokota_west_es@pac.dodea.edu)

Phone: 225-7611/8898 From the U.S.: 011-81-3117-55-5732

FAX: 225-5732 FAX from the U.S.: 011-81-3117-55-5732

Email return information to [StudentStatus.YokotaWestES@pac.dodea.edu](mailto:StudentStatus.YokotaWestES@pac.dodea.edu)

Please provide the following documents upon return if your child attended a different school during the departure:

- Copy/official transcript
- Copy of withdrawal grades with grading system from previous school
- Copy of documentation/notes of any progress made in accordance with
- IEP (Individualized Educational Plan) if applicable
- Copy of Standardized Test Scores, if applicable
- Copy of current class schedule (for middle and high school students)
- Samples of completed work

**Parents with questions or concerns regarding DoDEA schools during the voluntary departure have the following resources to assist them:**

### **DoDEA CRISIS TEAM PHONE NUMBERS:**

\*DSN: 644-5652

\*Commercial within Japan: dial 098-911-5111 and ask the operator to connect to 644-5652

\*Commercial from the United States: 011-81-611-744-5652

#### EMAIL ASSISTANCE:

Personnel in Japan — [evacuation.japan@pac.dodea.edu](mailto:evacuation.japan@pac.dodea.edu)

Personnel in the USA — [evacuation@hq.dodea.edu](mailto:evacuation@hq.dodea.edu)

DoDEA Japan departure webpage: [www.dodea.edu/home/japan-evacuation.cfm](http://www.dodea.edu/home/japan-evacuation.cfm)

Japan District Superintendent - [Supt.Japan.DSO@pac.dodea.edu](mailto:Supt.Japan.DSO@pac.dodea.edu)

DSN 225-3940, from the US 011-81-3117-55-3940

Navy Region Japan School Liaison Officer - [ruth.russell@fe.navy.mil](mailto:ruth.russell@fe.navy.mil)

DSN 243-2588, from the US 011-81-46-816-2588

## SECTION III

### REPASSAGE PROCEDURES

#### Before Leaving Designated Location

1. Commands disseminate the announcement using multiple forms of communications such as, Command Websites, Command Facebook, APAN Website, etc. In addition, Commanding Officers ensure that the Command Rep and OMBUDSMAN receive the announcement.
2. If attending a school in designated location, complete disenrollment paperwork and obtain copies of any records from stateside school. Notify school in Japan of date you intend children will return to class.
3. Family Members who departed under the Voluntary Authorized Departure are authorized Safe Haven allowances for up to 10 days from the date of the authorized departure termination (April 15, 2011).
4. Commanding Officers will ensure all sponsors (military and civilian) are briefed on procedures and entitlements in accordance with Navy Requirements. Commanding Officers will make sure that Command PASS Coordinator (CPC) (for military and civilian personnel) receives all required information as soon as possible.
5. CPC will work with sponsor (member) and/or family members to obtain necessary information required to complete Passenger Reservation Request (PRR) to make return travel arrangements for family members to include authorized pets and modification of orders (if needed) to get the approved accounting data.
6. CPC will obtain a copy of authorized departure orders for each completed PRR and forward PRR and a copy of the authorized departure orders to the supporting Navy Passenger Transportation Office (Yokosuka/Atsugi/Misawa).
7. Navy Passenger Transportation Office (NAVPTO) will review PRR for completeness of required information and submit to Navy Commercial Travel Office (CTO) for reservation processing.
8. CTO will book return flight for family and e-mail itinerary to all email addresses given on PRR form.
9. Once NAVPTO verifies this information as correct, the ticketed invoice will be forwarded to all e-mail addresses given on PRR form.

**Note: NAVPTO will send two emails (Notification of booking and the actual e-Ticket) per return flight ticket transaction to all e-mail addresses given on PRR form. The first e-mail is for booking the flight and the second email is for e-Ticketing. Please wait until you receive the second email before reporting to the Airport.**

### **Transit of Family Members (from Designated Location (Safe Haven) to Designated Installation)**

1. Family members receive e-Tickets and proceed to the designated airport for Repassage travel to Japan.
2. Ground transportation upon arrival in Japan will be arranged by the sponsor and/or family members. Each installation will have contact information for making reservation for Airport Shuttle services. Sponsor may use Privately Owned Vehicle (POV) or Commercial Transportation and may file for reimbursement.
3. For family members arriving at Narita Airport, proceed to DoD Liaison Counter for Bus boarding procedures (see Appendix I for location/diagram).
4. For pet transportation, the family member will need to check-in with the Animal Quarantine Services (AQS) located in the Airport.

#### **Note:**

We will have a greeting team in place at both Terminal 1 and Terminal 2 at Narita Airport. Our greeting teams will provide assistance with children, pets and luggage. They will be available daily until the last buses depart Narita. The current schedule has buses departing Narita at the regular times of 1530, 1730 and 1930. Extra buses will be available to accommodate safe haven returnees as needed.

### **Arrival of Family Members (to the Designated Installation)**

Upon arrival of the Airport Shuttle to the installation, a Command Representative and/or Sponsor will receive and assist arriving family members and provide assistance as required (i.e. transportation, baggage handling, etc.).

### **In-processing of Family Members**

#### **Travel Claim:**

Travel Processing Center - Hampton Roads (TPC-HR) remains the central processing site for all evacuation claims. Within 5 days of the Family Members returning to member's PDS, the family member or sponsor must file the DD Form 1351-2, the standard DoD travel Claim form. Forms and related information can be found at [www.cnmc.navy.mil](http://www.cnmc.navy.mil) under popular links.

If computer access is not available, contact TPC-HR at 1-866-239-0303 for assistance. Travel vouchers must include the names and ages of all dependents who evacuated.

For DoD Travel Claims for dependents of service members evacuated under the authorized departure from Japan, the requirement for an authorizing official signature at the member's command has been waived. Travel claims may be submitted via fax to 1-866-708-6985 or by mail to:

Director (Evac Tvl claim)  
Personnel Support Activity Detachment  
Naval Station Norfolk  
1755 Powhatan street, suite 229  
Norfolk, VA 23511-2984

Email submissions may be made to [evacuations@navy.mil](mailto:evacuations@navy.mil). For questions, contact TPC-HR at either 1-866-239-0303 or [evacuations@navy.mil](mailto:evacuations@navy.mil).

The process of filing travel claims is as follows:

(1) Member/Evacuated Family Member completes and signs the travel claims.

(2) Claims require a copy of the official travel orders and all receipts, travel itinerary (issued by commercial transportation office), lodging receipts, personally procured common carrier transportation expenses (e.g. airline tickets), and any other expense receipt incurred during travel to and from the designated Safe Haven. Lodging receipts are required in order to file a claim for reimbursement of a lodging expense. If evacuated family members stay with friends or relatives while at the safe haven, no lodging reimbursement is allowed even if lodging payment is made to the friend or relative. Meal receipts are not required for submission as meals are part of the per diem allowance.

(3) The TPC-HR processor will acknowledge all required receipts, verify orders, match personal information on the claim, and check the line of accounting to ensure it is appropriate for the category of evacuated family members.

(4) Evacuated Family Members who opt to remain at the safe haven for the remainder of the school year will continue their entitlement to Safe Haven allowances. Upon return to the Member's PDS, the evacuated family member/member will submit a final travel claim as stated above but must include documentation from the school that supports the delay of return. The letter must contain the child/children's name and date school year ended. Evacuated family members who elect to remain at their Safe Haven until the school year is completed will follow the below procedures for advances:

(a) Travel advance. Personnel entitled to Safe Haven allowances may request a 30-day advance payment of per diem. Email submissions may be made to [evacuations@navy.mil](mailto:evacuations@navy.mil). For advanced pay questions, contact TPC-HR at either 1-866-239-0303 or [evacuations@navy.mil](mailto:evacuations@navy.mil).

(b) A travel claim with required receipts must be filed every 30 days to settle expenses.

**NFAAS:**

Commanding Officers will ensure sponsors update location and risk assessment (if applicable) information of eligible family members in Navy Family Accountability and Assessment System (NFAAS) upon arrival in Japan.

**DoDEA:**

For family members with school age children, check-in at the school's main office before returning to class. If you haven't already sent records from any stateside schooling provide those to the registrar's office. High school and virtual school students need to meet with their guidance counselor. For more information, see Section II (Repassage General Information) DOD School Procedures section.

**Hospital (including TRICARE Enrollment-if applicable):**

- Health Records:
  - Return Medical Record to Naval Hospital Outpatient Records Counter. (*Complete/Confirm DD FORM 2569 (Other Health Insurance) if not Active Duty Service Member; DD FORM 2569 is included in Appendix 1 of this guide*).
  - Return Dental Record to Dental Clinic Front Counter.
- TRICARE:
  - Enrollment status should not be affected unless family member or sponsor changed enrollment at Safe Haven. Patient may confirm enrollment status at the TRICARE service desk.
- Appointments:
  - To schedule an appointment with your provider please contact Central Appointments
- DEERS information
  - Update DEERS information at the PSD located at your designated installation.

**General Reminders**

Keep all receipts associated with your travel.

## **SECTION IV**

### **ENTITLEMENTS**

Entitlements for all command sponsored family members can be found in the Joint Federal Travel Regulation (JFTR), Chapter 6. The sponsor's military service funds the evacuation allowances for all military families.

Entitlements for Department of Defense (DoD) civilian family members are listed in the Joint Travel Regulation (JTR) Chapter 6. These rules/entitlements are similar to those of Department of State (DoS), but are funded by the civilian sponsor's parent command within DoD.

Please note: Non-command sponsored family members' entitlement eligibility will be directed by the current Navy policy.

#### **PER DIEM – MILITARY**

Per Diem allowances for military command sponsored dependents while in a Safe Haven status provide a fixed amount for Meals and Incidental Expenses (M&IE) and reimburse actual lodging costs up to a specified maximum amount. The applicable maximum per diem allowance is the rate prescribed for the safe haven location and depends on the age of the family members.

Example family and Safe Haven location (real dollar amounts depend upon actual location)

Family Members: Parent, 14 year old, and 9 year old.

Per Diem rate: lodging \$100 per day and M&IE \$50 per day:

Family gets hotel suite for daily rate of \$175.00

1. For the first 30 days, beginning upon arrival at the Safe Haven, each family member 12 years of age and older will receive 100% of the fixed amount for M&IE and reimbursed for actual lodging costs not to exceed the maximum amount allowed in the Safe Haven per diem rate. Each family member under 12 years of age will receive up to 50% of that rate.

For lodging, the parent in our example family is entitled to \$100 per day, first child \$100 per day and second child \$50 per day which equals \$250 per day, but that is more than what she is paying for the hotel room. Therefore parent will be reimbursed for the actual cost of the lodging which is \$175 per day.

For M&IE, the parent is entitled to \$50, first child \$50, and second child \$25 totaling \$125. Family will receive the entire amount.

2. Beginning on the 31<sup>st</sup> day after the family arrives at their safe haven location, the amount allowed for lodging and M&IE (as described above) is reduced to 60% for dependents 12 years of age and older and 30% for those under 12 years of age.

Now the parent is entitled to \$60 per day, first child \$60 per day and second child \$30 per day. The new authorized maximum lodging amount for this family is now \$150 per day. Therefore, the parent will not be reimbursed for the entire cost of the hotel suite (\$175) because it now exceeds the maximum allowable rate for the family.

For M&IE, the rate has also dropped and the parent is now entitled to \$30 per day, first child \$30 per day and second child \$15 per day equaling \$75 per day. Family will receive the entire amount.

3. If the reduced per diem allowance is inadequate, the family may apply for an increased allowance from the Per Diem Travel and Transportation Committee. Contact your CPC for assistance on submitting a request. Please note; a strong and reasonable justification is necessary. If the request is granted an Evacuation Allowance Determination (EAD) specifying the amount of the approved increased per diem will be issued. The EAD will be sent to you with a copy to the appropriate finance office. It is recommended after you receive a copy of the approval that you contact the finance office you have been working with to insure they received a copy.

Please note the following:

1. It is recommended that families NOT sign any contractual agreement for lodging while on evacuation status. When the evacuation is lifted the family may not be able to be released from the contract and may therefore be responsible for any remaining fees, deposits, and/or charges on the contract.
2. The lodging allowance is forfeited if the evacuated family resides with family or friends.
3. If a family temporarily leaves their Safe Haven location (to visit friends, go on a vacation, etc.) the family will still receive lodging and M&IE allowances. However, if they are renting at their Safe Haven location, they will not get reimbursed for the hotel at the vacation site. But, if the family stops paying for lodging at their designated Safe Haven location and vacations in a different location, they will be reimbursed up to the allowable rate at their safe haven location, not at the vacation site.
4. Receipts for lodging are required, including lodging related items such as telephone and cable hook-up charges, etc.
5. Although receipts for M&IE are not required when you file your claim, it is recommended you save all receipts. Should you need to request an increase allowance after the rates have been reduced to 60/30% it will be necessary for you to show your expenses.
6. Furniture rental (NOT furniture purchase) is permitted as a reimbursable expense but is separate from the lodging allowance. Contact your CPC for more details.



## **PERDIEM - CIVILIAN**

Some of the evacuation allowances for DoD command-sponsored dependents of DoD state-side hired civilians are different than evacuation allowances of military families. Recommend DoD civilian families read the JTR, Chapter 6 (on-line) for more details of the Subsistence Expense Allowance (SEA) and other entitlements. Like the JFTR, Safe Haven location and family size will determine the amount of the allowable reimbursement.

Example Family and Safe Haven location: (actual dollar amounts depend on location)

- Family Members: Parent, 14 year old, and 9 year old.
- Per Diem rate: lodging \$100 per day and M&IE \$50 per day:
- Family gets hotel suite for daily rate of \$175.00

## **COMMERCIAL RATE**

First 30 days: The first evacuee is authorized up to 100% of the lodging rate or 150% if they qualify for the Special Family Compensation (see JTR), plus 100% of the M&IE per day. Each additional evacuee 18 years and older is entitled to 100% M&IE and each evacuee under age 18 is entitled to 50% of M&IE. Please note, only the first evacuated dependent (usually the spouse) is authorized a lodging allowance and receipts are required for the lodging.

For lodging, the parent in our example family is entitled to \$150 per day (since there are three dependents in the family she qualifies for the Special Family Compensation.) Since the authorized maximum lodging amount for this family is \$150 per day, Mom will not be reimbursed for the entire cost of the hotel suite (\$175) because it exceeds the maximum allowable rate for the family.

For M&IE, the parent is entitled to \$50, first child \$25, and second child \$25 totaling \$100. Family will receive the entire amount.

For days 31-179: The first evacuee's entitlement remains at 100% (or 150% if qualified for Special Family Compensation) of the lodging portion but the M&IE drops to 80% for each evacuee 18 and over and 40% for each evacuee under 18 years of age.

The parent is still entitled to \$150 per day for lodging but since the cost of the hotel suite (\$175) exceeds the maximum allowable lodging amount Mom will not be reimbursed for the entire cost of lodging.

For M&IE, the rate has dropped and the parent is now entitled to \$40 per day, and both children are entitled to \$20 per day totaling \$80. Family will receive the entire amount.

## **NONCOMMERCIAL RATE**

If an evacuated family is residing with friends or family members, for the first 30 days only, they are entitled to a lodging allowance in an amount equal to 10% of the lodging per diem rate for their area. The family is also entitled to the same M&IE entitlements as described above; 100/50% for the first 30 days and 80/40% for days 31-179.

## **TRANSITION SEPARATE MAINTENANCE ALLOWANCE (TSMA) - CIVILIAN**

TSMA may be granted to eligible employees to assist in defraying additional expenses incurred by an employee whose family members remain in temporary commercial housing at an authorized safe haven (due to educational considerations or other acceptable reasons) after the termination of the DoD Voluntary Authorized Departures from Japan and expiration of safe haven benefits (25 April 2011).

Note:

All TSMA requests must be submitted via their Chain of Command to HRO and must obtain the command (CO or designee's) endorsement.

## **UNACCOMPANIED BAGGAGE (UB)**

Families departing Japan as a result of the voluntary authorized departure are entitled an UB shipment in an amount not to exceed 350 pounds for each dependent age 12 and older, and 175 pounds for each dependent under age 12, with a maximum family limit of 1,000 pounds. The purpose of the shipment is for families to pack items they will need to sustain a temporary household, i.e. extra clothing, linens, toys, etc. However, please note that although UB is shipped expeditiously, transit times can be from 30-40 days. One thing that should be considered is to ship via parcel post and apply for reimbursement on return. This method may be much quicker and more convenient than making a shipment through government means. If there is too much to send via parcel post, arrangements can be made by the family member using <http://www.move.mil> or the sponsor can come to the FISC personal property office for assistance. Keep in mind that it could take as long as 10 work days to schedule a move through the government.

## **LOCAL TRANSPORTATION**

Local transportation allowances are paid as a flat rate of \$25.00 per day, per family regardless of the number of dependents in the family. No receipts are required.

Command-sponsored evacuated dependents are authorized reimbursement for transportation when required to travel from the safe haven location to obtain/renew a passport/military ID, or for medical screening required as a prerequisite to return to the member's PDS.

## **FILING VOUCHERS**

To receive reimbursement for voluntary authorized departure expenses, families need to complete DD-Form 1351-2. Your CPCs (military and civilian) can assist with processing administrative and financial paperwork.

## SECTION V

### **FREQUENTLY ASKED QUESTIONS**

- **Will anyone meet us at the airport to help us get back home?**

Military Coordinators and DoD Liaison Representatives will be available and provide assistance at the Narita Airport.

- **Will ground transportation be provided when I/we arrive at Narita Airport?**

Narita Shuttle Bus service will be available, for more information please access the CFAY website <https://www.cnmc.navy.mil/Yokosuka/Relocation/NaritaBusSignUp/index.htm>

- **Will we be allowed to bring our pets back with us?**

Conditional. For more information, please refer to the Japan District Veterinary Command (JDVC) website: [http://www.usarj.army.mil/organization/vet/r\\_doc.aspx](http://www.usarj.army.mil/organization/vet/r_doc.aspx)

Commercial from the States: 011-81-46-407-8464

DSN: 315-263-8464 Commercial inside Japan: 046-407-8464

- **What kind of paperwork will I need to provide in order to bring my pet(s) back?**

**The following paperworks needed to bring your pet(s) back on station:**

1. The original rabies certificates for the two most recent rabies vaccinations.
2. Results for current fluorescent antibody viral neutralization (FAVN) test (**Note: If the FAVN test result is unsatisfactory, the Animal Quarantine Services (AQS) at Narita Airport will issue 180 days quarantine. Upon arrival at the installation, the pet owner must schedule a follow-up (within 72 hours) appointment with the Army VET to discuss further FAVN test requirements.**)
3. Copy of approval for importation from the Japan Animal Quarantine Service
4. Veterinary health certificate for each pet (MDJ OP 2209 or USDA Certification)

For more information, please refer to the Japan District Veterinary Command (JDVC):

[http://www.usarj.army.mil/organization/vet/r\\_doc.aspx](http://www.usarj.army.mil/organization/vet/r_doc.aspx)

Commercial from the States: 011-81-46-407-8464

DSN: 315-263-8464 Commercial inside Japan: 046-407-8464

- **Is it really safe there?**

Please refer to Department of State Japan Travel Alert dated 14 April 2011

[http://travel.state.gov/travel/cis\\_pa\\_tw/pa/pa\\_5437.html](http://travel.state.gov/travel/cis_pa_tw/pa/pa_5437.html).

- **What paperwork will I need in order to get my orders and/or flight tickets?**

As noted in the section III of this guide, the Command PASS Coordinator (CPC) for military and civilian personnel will work with the sponsor (member) and/or family members to obtain necessary information required to complete a Passenger Reservation Request (PRR) to make return travel arrangement for family members to include authorized pets and modification of orders (if needed) to get the approved accounting data.

- **We are supposed to PCS in September. Can we just stay where we are and move to our new duty station when the time comes?**

Yes, you may. If your sponsor is *not* in receipt of orders and you desire to remain in your designated destination/safe haven, your sponsor will have to submit for an Early Return of Dependents via BUPERS Online through his command. If your sponsor *is* in receipt of orders, he can request for Advance Travel of Dependents via his Command PSD liaison or Command PASS Coordinator.

- **Do per diem allowances for family members (military and civilian employee) vary between families?**

Yes. It depends on location, number of family, and age (12 and over receive 100% per diem rate and under 12 receive 50% for the first 30 days). Beyond 30 days, they will receive 60% and 30%, respectively.

- **Who signs the Travel claim form before it is sent to TPC Hampton Roads?**

It can be signed by member or the family members. The Admin Officer does not have to sign the form.

- **Did my sponsor's (military) entitlements (COLA, OHA, FSA, BAS, etc.) stop upon evacuation?**

COLA was reduced to the "single rate" upon departure; OHA and BAS continue as normal.

- **Did my sponsor's (civilian) entitlements (PAL, TQSA, LQA, etc.) stop upon evacuation?**

No. If the family departed and the employee remained at the installation, the post allowance (PAL) will be reduced to the "employee without family" rate. If early return of the employee's family to the installation is anticipated, the temporary quarters subsistence allowance (TQSA) may be continued. The living quarters allowance may be continued at the "with family" rate for a period not to exceed six months.

- **If I am evacuated and I am currently employed on military base installations, is my job secure?**

For employment status, please check with your employer or HRO regarding job status.

- **Will schools be fully operating when we return?**

The schools are fully operational at this time. Classes that have been combined will draw back to original locations. Schools will make every effort to keep students in same the classroom setting as before departure.

- **How do we re-enroll our children in school?**

Only withdraw from any designated alternate location school (if attending school) and inform the school in your permanent duty location of your return date. Please bring any records from the school at your designated alternate location. (Some alternate designated location schools may wish to forward records for you. Hand carrying records is recommended if possible.)

- **What required paperwork will my children need upon return to school on base?**

Any transcripts from schools attended and/or any supporting evidence of academic progress. (Some alternate designated location schools may wish to forward records for you. Hand carrying records is recommended if possible.)

- **Can my child complete the school year in the stateside school?**

If you would like to complete the school year in your current designated alternate location, you may do so. Please contact the school for spring “re-registration” if your child will be attending DoDEA for the 2011-2012 school year.

- **Will my child start class the day I check in at the school’s main office?**

Yes. Your child will be able to start school immediately.

- **How do we re-enroll our children in school?**

If you did not withdraw you do not need to re-enroll, however all parents should inform the school of their child’s expected return date. If you did withdraw you can complete DoDEA “pre-enrollment” online at <https://registration.dodea.edu/>. This pre-enrollment helps the school prepare proper staffing. You will need to complete additional paperwork at the school upon arrival.

- **If my child is promoted by his school in the states, can he still attend the DoDEA school when we return?**

Yes. Even if a student is “promoted” stateside, he still missed a good deal of instructional time. (Remember, many stateside schools start in early August.) It is strongly recommended that you put your child back in school upon return to Japan.

- **Is the water still contaminated?**

The water at all U.S. military installations and housing detachments is safe and has remained safe for adults, children and infants since the March 11 Northeast Japan earthquake and tsunami. To ensure the safety of the community, Japanese and U.S. Department of Defense officials continue to monitor water quality on a regular basis.

- **How will I receive medical care back on station (Japan)?**

Your military treatment facility, US Naval Hospital Yokosuka and Branch Health Clinics (BHCs) are fully operational and will provide care and services during normal hours of operation. Please contact your Military Treatment Facility (MTF) with any health related questions or concerns.

- **Was my TRICARE eligibility/status affected during my evacuation? Do I need to re-enroll with TRICARE?**

Your TRICARE eligibility/status has remains unchanged. If you enrolled to another location (Safe Haven) after departing Japan, you will need to re-enroll upon your return to Japan. If you have any questions, please contact your local TRICARE office.

- **Will child care facilities be operating when we return?**

Although the centers are and will be open, you should expect the possibility of limited services as the centers re-incorporate staff members returning from the Voluntary Departure. For any specific questions, please contact your Child Care center.

- **I live out in town. By the time I get back, I will be behind on my rent and utilities. Will my late payment fees be reimbursable?**

No. This is a contractual responsibility of the Renter-- paying rent, utilities and any other contractual obligations. If you need assistance with such services or interpretation please contact your Housing Office.

- **My sponsor is currently deployed and I was evacuated, will I be penalized for lawn or other required maintenance?**

No, you will not be penalized. However, you may have or will receive a notice of a violation. If so, upon your return, simply notify your assigned housing representative of your status.

- **Will there be Disaster (Radiation, Tsunami and Earthquake) counseling for returning family members?**

Fleet and Family Support Centers (FFSC) offer brief solution-focused counseling to address numerous concerns. Counseling sessions can be arranged for adults, families or children and the counselor will tailor the sessions to your personal concerns.

If you have concerns regarding your child's readjustment please call Fleet & Family Support Centers (Yokosuka 243-7878/Atsugi 264-4188) or Airman & Family Readiness Center 226-4735(Misawa).

- **Will Morale, Welfare, Recreation Programs and Services be open when we return?**

Many facilities and programs have changed hours of operation due to the shortages of staff and low patron counts. All current hours and services are listed on the respective base MWR website.

- **For MWR Services paid in advance (i.e. Youth Sports, Fitness classes, Personal Trainer, massages, etc.) will I be refunded?**

Refunds will be handled on a case-by-case and program specific bases. The customer should contact the program or facility where the cancellation occurred.

- **I believe I will need temporary lodging as my utilities and other household services were turned off when I departed. How do I arrange for lodging?**

If temporary Lodging is needed, reservations can be made for **Navy Gateway Inns & Suites** through: [www.dodlodging.net](http://www.dodlodging.net), by calling 1-877-Navy-Bed or e-mailing Atsugi: [M-AT-NGI&S@fe.navy.mil](mailto:M-AT-NGI&S@fe.navy.mil), Yokosuka/Negishi: [ngis\\_yokosuka@fe.navy.mil](mailto:ngis_yokosuka@fe.navy.mil), Misawa: [ngis\\_misawa@fe.navy.mil](mailto:ngis_misawa@fe.navy.mil). You can also call the NGIS direct by calling: Yokosuka: 243-7317/011-81-46-816-7317, Atsugi: 264-3696/011-81-46-763-3696 and Misawa: 226-3131/011-81-17-677-3131. Reservations for **Navy Lodge** can be made by calling: 1-800-Navy-Inn or the lodge directly at Yokosuka 011-81-046-816-6708 or Atsugi 011-81-46-770-3304. You can also visit online at: <https://www.navy-lodge.com>.

- **I had full day child care/school age care when I departed, will that still be available?**

Yes. If you did not terminate your contract, you are still eligible to continue full time child care services. Contact the Child Care POC to inform when you plan on returning and needing care so we can coordinate.

- **Do I need any paperwork to re-enter child care?**

If your paperwork was current upon departure, no additional paperwork is needed to re enter care.

- **I was using a Child Development Home (CDH) provider; will they be available upon my return?**

Contact your installations CYP POC for further information on available CDH care and placement.

- **What about part day preschool programs?**

For preschool programs, please contact your installation CYP POC for information on part day preschool programs.

- **Will hourly child care be available?**

Please contact your installation CYP POC to inquire about when hourly Child Care will be available. As families begin to return, the priority will be for those families who already were in full time or contracted school age care programs. Hourly and part day preschool programs will be examined for potential re-opening as staff returns from voluntary departure.

- **While I'm evacuated, did the Post Office hold my incoming mail?**

All eligible family members' mail was put on blanket hold except those that requested to have their mail forwarded to their destination. Those that requested to have their mail forwarded to their destination will have to notify the Post Office to stop forwarding and start receiving their mail back to Japan.

- **I work at the NEX and intend to remain in my safe haven while my children finish school. Will my job still be available upon my return?**

The NEX will be holding positions of all military dependents who work for the NEX and was part of the voluntary early departure, until 15 June 2011. Please contact the NEX District Human Resource Office before 15 June 2011 if you wish to resume work.

## **APPENDIX I**

### **FORMS**

Passenger Reservation Request – PCS Travel (NAVPTO FAR EAST, Form 4650/5 Rev 07/09)

Travel Voucher or Subvoucher (DD Form 1351-2 (March 2008)

Evacuation Lodging Reimbursement Certification (Hampton Roads)

PCS Travel Advance Request Form (Hampton Roads)

Travel History Form (Hampton Roads)

Absence Form Quarters Notice Form (CFAY Form 11101/46)

Third Party Collection Program/Medical Services Account/Other Health Insurance

TRICARE Beneficiaries Departing Japan

Narita Airport (DoD Liaison Desk) Location Diagram



# PASSENGER RESERVATION REQUEST – PCS TRAVEL

1. COMMAND		2. DATE		3. TYPE <input type="checkbox"/> INITIAL <input type="checkbox"/> CHANGE		<b>NAVPTO USE ONLY</b>	
4. PLR/TRAVEL COORDINATOR		5. EMAIL ADDRESS		6. PHONE			
7. MEMBER'S FULL NAME (Last, First, Middle)		7a. DATE OF BIRTH		7b. GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		NO-AMC CERT (ATTACH PORT CALL IF BOOKED)	
8. RATE/RANK /		9. SSN		10. PHONE		TRAVEL TYPE    CLERK INITIALS    MIP	
11. EMAIL ADDRESS		12. TYPE OF TRAVEL <input type="checkbox"/> PCS <input type="checkbox"/> SEP <input type="checkbox"/> RET <input type="checkbox"/> COT		13. Travel Performance Period (TPP) <input type="checkbox"/> 10 DAYS MIN <input type="checkbox"/> PET SPACE, 20 DAYS MIN		SERVICE BRANCH    TVL ADVISE MSG DTG	
14. MEMBER'S OFFICIAL ROUTING (INCLUDING TDY POINTS) Patriot Express Mandate, requires members TPP in accordance block 13 TPP Availability Window    FROM    TO		16. PROPOSED DETACHMENT DATE		17. RNLT DATE		AMC NON-USE JUSTIFICATION	
15. FAMILY MEMBER(S) OFFICIAL ROUTING (IF DIF FROM MEMBER) DATE    FROM    TO		18. ALTERNATE ROUTING REQUESTED FOR MEMBER DATE    FROM    TO		19. ALTERNATE ROUTING REQUESTED FOR DEPENDENT(S) DATE    FROM    TO		NOTE: MEMBER MUST PAY ADDITIONAL COST, IF ANY.	
20. DEPENDENT INFORMATION: (Please indicate information listed below EXACTLY as written on Government Issued Passports.) NAME (Last, First, Middle Name)    RELATIONSHIP    DOB    PASSPORT NUMBER    EXPIRATION DATE    CITIZENSHIP		21. PET SHIPMENT REQUEST (NOTE: AMC LIMITS 2 PETS, CATS OR DOGS ONLY, WITH MAXIMUM WEIGHT OF 100 POUNDS EACH) PET #1 <input type="checkbox"/> CAT <input type="checkbox"/> DOG    CAGE W    L    H    TOTAL WEIGHT    LBS    AGE    SEX    BREED PET #2 <input type="checkbox"/> CAT <input type="checkbox"/> DOG    CAGE W    L    H    TOTAL WEIGHT    LBS    AGE    SEX    BREED PET #3 <input type="checkbox"/> CAT <input type="checkbox"/> DOG    CAGE W    L    H    TOTAL WEIGHT    LBS    AGE    SEX    BREED		22. SPECIAL CONSIDERATIONS <input type="checkbox"/> INFANT <input type="checkbox"/> MEDICAL (SPECIFY)		24. REMARKS	
23. TYPE SEAT REQUESTED (COMMERCIAL AIRCRAFT ONLY) <input type="checkbox"/> WINDOW <input type="checkbox"/> AISLE <input type="checkbox"/> NO SMOKING (IF APPLICABLE)		25. DATE		26. PRINTED NAME (Last, First, MI)		27. SIGNATURE	
28. DATE		29. DATE		30. DATE		31. DATE	

NAVPTO FAR EAST, Form 4650/5 (Rev 07/09)

<b>TRAVEL VOUCHER OR SUBVOUCHER</b>				Read Privacy Act Statement, Penalty Statement, and Instructions on back before completing form. Use typewriter, ink, or ball point pen. <b>PRESS HARD. DO NOT use pencil. If more space is needed, continue in remarks.</b>			
<b>1. PAYMENT</b> <input type="checkbox"/> Electronic Fund Transfer (EFT) <input type="checkbox"/> Payment by Check		<b>SPLIT DISBURSEMENT:</b> The Paying Office will pay directly to the Government Travel Charge Card (GTCC) contractor the portion of your reimbursement representing travel charges for transportation, lodging, and rental car if you are a civilian employee, unless you elect a different amount. Military personnel are required to designate a payment that equals the total of their outstanding government travel card balance to the GTCC contractor. Pay the following amount of this reimbursement directly to the Government Travel Charge Card contractor: \$ _____					
2. NAME (Last, First, Middle Initial) (Print or type)		3. GRADE		4. SSN		5. TYPE OF PAYMENT (X as applicable)	
6. ADDRESS: a. NUMBER AND STREET		b. CITY		c. STATE		d. ZIP CODE	
e. E-MAIL ADDRESS						<input type="checkbox"/> TDY <input type="checkbox"/> PCS <input type="checkbox"/> Dependent(s)	
7. DAYTIME TELEPHONE NUMBER & AREA CODE		8. TRAVEL ORDER/AUTHORIZATION NUMBER		9. PREVIOUS GOVERNMENT PAYMENTS/ADVANCES		10. FOR D.O. USE ONLY	
11. ORGANIZATION AND STATION						a. D.O. VOUCHER NUMBER	
12. DEPENDENT(S) (X and complete as applicable)		13. DEPENDENTS' ADDRESS ON RECEIPT OF ORDERS (Include Zip Code)				b. SUBVOUCHER NUMBER	
<input type="checkbox"/> ACCOMPANIED <input type="checkbox"/> UNACCOMPANIED		a. NAME (Last, First, Middle Initial) b. RELATIONSHIP c. DATE OF BIRTH OR MARRIAGE				c. PAID BY	
						d. COMPUTATIONS	
14. HAVE HOUSEHOLD GOODS BEEN SHIPPED? (X one)		<input type="checkbox"/> YES <input type="checkbox"/> NO (Explain in Remarks)					
15. ITINERARY		16. POC TRAVEL (X one)		17. DURATION OF TRAVEL		18. REIMBURSABLE EXPENSES	
a. DATE		b. PLACE (Home, Office, Base, Activity, City and State; City and Country, etc.)		c. MEANS/ MODE OF TRAVEL d. REASON FOR STOP e. LODGING COST f. POC MILES		(1) Per Diem (2) Actual Expense Allowance (3) Mileage (4) Dependent Travel (5) DLA (6) Reimbursable Expenses (7) Total (8) Less Advance (9) Amount Owed (10) Amount Due	
DEP ARR DEP ARR DEP ARR DEP ARR DEP ARR DEP ARR DEP ARR DEP ARR		OWN/OPERATE PASSENGER		12 HOURS OR LESS MORE THAN 12 HOURS BUT 24 HOURS OR LESS MORE THAN 24 HOURS		0.00 0.00 0.00	
19. GOVERNMENT/DEDUCTIBLE MEALS		20. CLAIMANT SIGNATURE		21. APPROVING OFFICIAL'S PRINTED NAME		22. ACCOUNTING CLASSIFICATION	
a. DATE		b. NO. OF MEALS		c. TELEPHONE NUMBER		d. DATE	
23. COLLECTION DATA		24. COMPUTED BY		25. AUDITED BY		26. TRAVEL ORDER/ AUTHORIZATION POSTED BY	
						27. RECEIVED (Payee Signature and Date or Check No.)	
						28. AMOUNT PAID	

DD FORM 1351-2, MAR 2008

PREVIOUS EDITION MAY BE USED  
UNTIL SUPPLY IS EXHAUSTED.Exception to SF 1012 approved by GSA/IRMS 12-91  
Adobe Designer 7.0

Reset

## PRIVACY ACT STATEMENT

**AUTHORITY:** 5 U.S.C. Section 5701, 37 U.S.C. Sections 404 - 427, 5 U.S.C. Section 301, DoDFMR 7000.14-R, Vol. 9, and E.O. 9397.

**PRINCIPAL PURPOSE(S):** This record is used for reviewing, approving, accounting, and disbursing money for claims submitted by Department of Defense (DoD) travelers for official Government travel. The Social Security number (SSN) is used to maintain a numerical identification filing system for filing and retrieving individual claims.

**ROUTINE USE(S):** Disclosures are permitted under 5 U.S.C. 552a(b), Privacy Act of 1974, as amended. In addition, information may be disclosed to the Internal Revenue Service for travel allowances, which are subject to Federal income taxes, and for any DoD "Blanket Routine Use" as published in the Federal Register.

**DISCLOSURE:** Voluntary; however, failure to furnish the information requested may result in total or partial denial of the amount claimed.

## PENALTY STATEMENT

There are severe criminal and civil penalties for knowingly submitting a false, fictitious, or fraudulent claim (U.S. Code, Title 18, Sections 287 and 1001 and Title 31, Section 3729).

## INSTRUCTIONS

### ITEM 1 - PAYMENT

Member must be on electronic funds (EFT) to participate in split disbursement. Split disbursement is a payment method by which you may elect to pay your official travel card bill and forward the remaining settlement dollars to your predesignated account. For example, \$250.00 in the "Amount to Government Travel Charge Card" block means that \$250.00 of your travel settlement will be electronically sent to the charge card company. Any dollars remaining on this settlement will automatically be sent to your predesignated account. Should you elect to send more dollars than you are entitled, "all" of the settlement will be forwarded to the charge card company. Notification: you will receive your regular monthly billing statement from the Government Travel Charge Card contractor; it will state: paid by Government, \$250.00, 0 due. If you forwarded less dollars than you owe, the statement will read as: paid by Government, \$250.00, \$15.00 now due. Payment by check is made to travelers only when EFT payment is not directed.

### REQUIRED ATTACHMENTS

1. Original and/or copies of all travel orders/authorizations and amendments, as applicable.
2. Two copies of dependent travel authorization if issued.
3. Copies of secretarial approval of travel if claim concerns parents who either did not reside in your household before their travel and/or will not reside in your household after travel.
4. Copy of GTR, MTA or ticket used.
5. Hotel/motel receipts and any item of expense claimed in an amount of \$75.00 or more.
6. Other attachments will be as directed.

### ITEM 15 - ITINERARY - SYMBOLS

#### 15c. MEANS/MODE OF TRAVEL (Use two letters)

GTR/TKT or CBA (See Note)	- T	Automobile	- A
Government Transportation	- G	Motorcycle	- M
Commercial Transportation	- C	Bus	- B
(Own expense)	- C	Plane	- P
Privately Owned	- P	Rail	- R
Conveyance (POC)	- P	Vessel	- V

Note: Transportation tickets purchased with a CBA must not be claimed in Item 18 as a reimbursable expense.

#### 15d. REASON FOR STOP

Authorized Delay	- AD	Leave En Route	- LV
Authorized Return	- AR	Mission Complete	- MC
Awaiting Transportation	- AT	Temporary Duty	- TD
Hospital Admittance	- HA	Voluntary Return	- VR
Hospital Discharge	- HD		

### ITEM 15e. LODGING COST

Enter the total cost for lodging.

### ITEM 19 - DEDUCTIBLE MEALS

Meals consumed by a member/employee when furnished with or without charge incident to an official assignment by sources other than a government mess (see JFTR, par. U4125-A3g and JTR, par. C4554-B for definition of deductible meals). Meals furnished on commercial aircraft or by private individuals are not considered deductible meals.

### 29. REMARKS

- a. INDICATE DATES ON WHICH LEAVE WAS TAKEN:
- b. ALL UNUSED TICKETS (including identification of unused "e-tickets") MUST BE TURNED IN TO THE T/O OR CTO.

**EVACUATION LODGING REIMBURSEMENT CERTIFICATION**

The purpose of this certification is to ensure the accurate lodging amounts are reimbursed during the evacuation of the member/sponsor and their dependents (actual lodging receipt is still required). When the member/sponsor and their dependents evacuate and reside together, the lodging is normally claimed/paid via the dependent evacuation travel claim. Since there are occasions when the travel claims are paid via separate systems (DTS and WinIATS) and at different times, this certification is required to try and prevent the duplicate payment of lodging.

Member/Sponsor Certification: The following lodging reimbursement is requested and this lodging has not and will not be claimed via a separate travel claim. In addition, this lodging has not been paid via another Government Agency (FEMA):

Name: \_\_\_\_\_

Pay Grade: \_\_\_\_\_

SSN: \_\_\_\_\_

Command: \_\_\_\_\_

Tele #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name and Location of Lodging: \_\_\_\_\_

\_\_\_\_\_ .

Dates of Lodging: \_\_\_\_\_ .

Daily Lodging Amount: \_\_\_\_\_ .

Name/Relationship of Personnel that resided in this Lodging:

\_\_\_\_\_

\_\_\_\_\_ .

Additional Information concerning this lodging reimbursement:

\_\_\_\_\_

\_\_\_\_\_ .

\_\_\_\_\_  
Employee/Sponsor Signature

\_\_\_\_\_  
Command Authorizing Official Signature

**PCS Travel Advance Request Form**

**All requests must have PCS orders attached**

(Privacy Act: Authority: AR 37-106, chapter 5 Purpose: To obtain information about individual's travel. Uses: Posting information to IATS/ DD 1588/Computation of advance travel. Disclosure: Mandatory. Will be denied payment if failure to provide information requested.)

For prompt payment of your advance please complete this form at least twenty working days prior to sign out date. All travel advances are paid @ 80% with the money being direct deposited into your current military pay account approximately five days prior to your sign out date. There are NO cash or check payments.

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ Sign Out Date: \_\_\_\_\_

Rank: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

Current Address: Street: \_\_\_\_\_ City, ST, Zip: \_\_\_\_\_

Banking EFT:      Checking      Savings

Routing #: ☐☐☐☐☐☐☐☐☐☐ Account #: \_\_\_\_\_

Spouse's name \_\_\_\_\_

Is Spouse Military      YES      NO

SSN: (For Military Spouse Only) \_\_\_\_\_

**Please list NAME and Date of Birth (day, month, year) of children traveling with you:**

NAME _____	DOB _____	NAME _____	DOB _____
NAME _____	DOB _____	NAME _____	DOB _____
NAME _____	DOB _____	NAME _____	DOB _____

**PLEASE READ AND COMPLETE ONLY SPACES THAT IS APPLICABLE TO YOUR PCS MOVE .**

1.) Are you requesting an advance for your travel:    Yes      No  
Is any of your travel going to be by POV?    YES    NO  
If yes, number of POV's used for this PCS move.      1      2  
If yes, then POV travel is from (City,ST) \_\_\_\_\_ To(City,ST) \_\_\_\_\_  
Are you buying your own ticket:    YES    NO    Cost \$ \_\_\_\_\_  
Ticket you purchased is from (City, ST) \_\_\_\_\_ To(City, ST,Country) \_\_\_\_\_  
Will you be taking the Alaska Ferry System?    YES    NO  
If yes, what port will you be departing From: \_\_\_\_\_ Arriving: \_\_\_\_\_

2.) Are your dependents relocating?    YES    NO    What date? \_\_\_\_\_  
Are you requesting an advance for your dependent travel?    YES    NO  
Is any of your travel going to be by POV?    YES    NO  
If yes, number of POV's used for this PCS move.      1      2  
If yes, then POV travel is from (City,ST) \_\_\_\_\_ To(City, ST) \_\_\_\_\_  
Are you buying your own ticket:    YES    NO    Cost \$ \_\_\_\_\_  
Ticket you purchased is from (City, ST) \_\_\_\_\_ To(City, ST, Country) \_\_\_\_\_  
Will you be taking the Alaska Ferry System?    YES    NO  
If yes, what port will you be departing From: \_\_\_\_\_ Arriving to: \_\_\_\_\_

3) Are you requesting an advance for Dislocation Allowance (DLA)    YES    NO  
(No advance DLA will be given for single service members E-5 and below who will not be residing off post at the new duty station.)

4) Are you Requesting Advance for a DITY move (Attach DD Form 2278)    YES    NO

Soldier's Signature \_\_\_\_\_ DATE \_\_\_\_\_

# TRAVEL HISTORY FORM

## PRIVACY ACT STATEMENT:

**Authority:** USC 5701.37, USC 404-427, EO 9397.31, CFR 209 and/or 210.

**Principal Purpose(s):** Used for reviewing, approving, accounting and disbursing for official travel. SSN is used to maintain a numerical identification system for individual claims. The information is confidential and is needed to prove entitlement to payments. The information will be used to process payment data from Federal agency to the financial institution and/or its agent(s).

**Routine Use(s):** To substantiate claims for reimbursement for official travel.

**Disclosure:** Voluntary; however, failure to furnish information requested may result in total or partial denial of amount claimed and may delay or prevent the receipt of payments through the ETF/DDS programs.

<b>NAME</b> (Last, First, MI):	<b>SSN:</b>
<b>Pay Grade</b> (i.e., E5, O3, GS9):	<b>Activity/Command:</b>
<b>Work Phone:</b> Comm:	<b>Home Phone:</b>
DSN:	
<b>Home Address, City, State, Zip:</b>	

## **FOR EFT/DDS PAYMENTS PLEASE PROVIDE THE FOLLOWING INFORMATION:**

<b>Account Type</b> (Circle one):  Checking                  Savings	<b>Account Number:</b>
<b>Name of Financial Institution:</b>	<b>Financial Institution's Routing Number (RTN):</b>  Note: Routing Number must be 9 digits and can be found on the bottom of your checks or from your financial institution.
<b>Signature of MBR:</b>	<b>Date:</b>

ABSENCE FROM QUARTERS NOTICE			
Sponsor's Name	SSN	Rank/Rate/Grade	House Address
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mailing Address (DMS for Deployed)		Contact Information	
<input type="text"/>		Home <input type="text"/>	
		Work <input type="text"/>	
		Cell <input type="text"/>	
		Email Address <input type="text"/>	
Date of Absence			
From: <input type="text"/>		To: <input type="text"/>	
Applies to: Entire Family <input type="radio"/> Family of the Sponsor only <input type="radio"/> Sponsor <input type="radio"/> Deployed Sponsor <input type="radio"/>			
Address while absent in case of emergency		Telephone number while absent in case of emergency:	
<input type="text"/>		<input type="text"/>	
		Email address while absent in case of emergency:	
		<input type="text"/>	
Name and Address of Caretaker (Must have SOFA Status and over 18 years old)		Caretaker Contact Info	
<input type="text"/>		Home <input type="text"/>	
		Work <input type="text"/>	
		Cell <input type="text"/>	
Caretaker will reside in quarters during absence Yes <input type="radio"/> No <input type="radio"/>		Email Address <input type="text"/>	
CERTIFICATION (Please check each statement)			
1. During this absence, my residence and grounds will be adequately cared for by the above named caretaker.			<input type="checkbox"/>
2. I understand that should the grounds not be maintained in accordance with housing policy, Housing will have the grounds accomplished by Contractor and I will be liable for the total cost.			<input type="checkbox"/>
3. I understand absence in excess of 90 days is not permissible.			<input type="checkbox"/>
4. I understand it is against regulations to rent or sublease the premise during my absence.			<input type="checkbox"/>
5. My spouse or I will notify the site management office immediately upon my return.			<input type="checkbox"/>
6. I understand the Housing Office will enter my housing unit in case of an emergency.			<input type="checkbox"/>
7. I understand I am responsible for the conduct of my caretaker while in my assigned quarters.			<input type="checkbox"/>
Resident's Signature		Date	
<input type="text"/>		<input type="text"/>	
Caretaker's Signature		Date	
<input type="text"/>		<input type="text"/>	
Housing Manager's Signature	Approved <input type="checkbox"/> Disapproved <input type="checkbox"/>	Date	
<input type="text"/>		<input type="text"/>	
Remarks		Reasons for Disapproval	
<input type="text"/>		<input type="text"/>	

<b>THIRD PARTY COLLECTION PROGRAM/MEDICAL SERVICES ACCOUNT/ OTHER HEALTH INSURANCE</b> <i>(Read Privacy Act Statement before completing this form.)</i>		OMB No. 0704-0323 OMB approval expires Mar 31, 2013	
The public reporting burden for this collection of information is estimated to average 3 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, Executive Services Directorate, Information Management Division, 1155 Defense Pentagon, Washington, DC 20301-1155 (0704-0323). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. <b>PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE ABOVE ORGANIZATION. RETURN COMPLETED FORM TO REQUESTING MILITARY TREATMENT FACILITY.</b>			
<b>PRIVACY ACT STATEMENT</b>			
<b>AUTHORITY:</b> Title 10 USC, Sections 1095 and 1079b; Executive Order 9397. <b>PRINCIPAL PURPOSE(S):</b> Information will be used to collect from private insurers for medical care provided to the Military Treatment Facility (MTF) patient. Such monetary benefits accruing to the MTF will be used to enhance health care delivery in the MTF. <b>ROUTINE USE(S):</b> In addition to those disclosures generally permitted under 5 USC 552a(b) of the Privacy Act, the information on this form will be released to your insurance company. <b>DISCLOSURE:</b> Voluntary. Failure to provide complete and accurate information may result in disqualification for health care services from MTFs.			
<b>PATIENT INFORMATION</b>			
1. PATIENT NAME (Last, First, Middle Initial)		2. SSN	3. DATE OF BIRTH (YYYY/MM/DD)
4a. MAILING ADDRESS (Include ZIP Code)		b. HOME TELEPHONE NO. (      )	
		5a. FAMILY MEMBER PREFIX	b. SPONSOR SSN
6a. PATIENT'S EMPLOYER'S NAME		b. EMPLOYER TELEPHONE NUMBER (      )	
<b>INSURANCE INFORMATION</b>			
7. DO YOU HAVE OTHER HEALTH INSURANCE? (This includes employer health insurance benefits, other commercial health insurance coverage, and Medicare Supplement.)			
a. YES. (Complete Item 8 and the remaining sections below.)			
b. NO, I am a DoD beneficiary and rely solely on TRICARE, Medicare, or Medicaid. (Proceed to Item 12.)			
c. NO, but I am not a DoD beneficiary. (Proceed to Item 11.)			
8. PRIMARY MEDICAL INSURANCE INFORMATION. If you have an insurance card that can be copied or scanned by the MTF representative, please provide it and proceed to Item 10; otherwise, please complete the blocks below.			
a. NAME OF POLICY HOLDER (Last, First, Middle Initial)		b. DATE OF BIRTH (YYYY/MM/DD)	c. RELATIONSHIP TO POLICY HOLDER
d. POLICY HOLDER'S EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER			
e. INSURANCE COMPANY NAME, ADDRESS AND TELEPHONE NUMBER			
f. CARD HOLDER ID	g. POLICY ID	h. GROUP POLICY ID	i. GROUP PLAN NAME
j. ENROLLMENT/PLAN CODE	k. INSURANCE TYPE	l. POLICY EFFECTIVE DATE (YYYY/MM/DD)	m. POLICY END DATE (YYYY/MM/DD)
n. (1) PHARMACY (Rx) INSURANCE COMPANY NAME, ADDRESS, AND TELEPHONE NUMBER			
(2) Rx POLICY ID	(3) Rx BIN NUMBER	(4) Rx PCN NUMBER	

DD FORM 2569, FEB 2011

PREVIOUS EDITION IS OBSOLETE.

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<b>9. SECONDARY MEDICAL INSURANCE INFORMATION.</b> If you have an insurance card that can be copied or scanned by the MTF representative, please provide it and proceed to Item 10; otherwise, please complete the blocks below.							
a. NAME OF POLICY HOLDER ( <i>Last, First, Middle Initial</i> )				b. DATE OF BIRTH (YYYY/MM/DD)		c. RELATIONSHIP TO POLICY HOLDER	
d. POLICY HOLDER'S EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER							
e. INSURANCE COMPANY NAME, ADDRESS AND TELEPHONE NUMBER							
f. CARD HOLDER ID		g. POLICY ID		h. GROUP POLICY ID		i. GROUP PLAN NAME	
j. ENROLLMENT/PLAN CODE		k. INSURANCE TYPE		l. POLICY EFFECTIVE DATE (YYYY/MM/DD)		m. POLICY END DATE (YYYY/MM/DD)	
n. (1) PHARMACY (Rx) INSURANCE COMPANY NAME, ADDRESS AND TELEPHONE NUMBER.							
(2) Rx POLICY ID			(3) Rx BIN NUMBER			(4) Rx PCN NUMBER	
<b>10. ARE THERE OTHER FAMILY MEMBERS COVERED UNDER THIS POLICY HOLDER?</b>							
a. YES ( <i>Proceed to 10c. - f.</i> )				b. NO ( <i>Proceed to Item 12.</i> )			
c. NAME ( <i>Last, First, Middle Initial</i> )	d. SSN	e. DATE OF BIRTH (YYYY/MM/DD)	f. RELATIONSHIP TO POLICY HOLDER	c. NAME ( <i>Last, First, Middle Initial</i> )	d. SSN	e. DATE OF BIRTH (YYYY/MM/DD)	f. RELATIONSHIP TO POLICY HOLDER
<b>11. MEDICARE OR MEDICAID INFORMATION</b>							
a. MEDICARE PART A NUMBER		b. MEDICARE PART B NUMBER		c. MEDICARE MANAGED CARE PLAN NAME			
d. MEDICARE PART D NUMBER AND PLAN NAME				e. MEDICAID NUMBER/MANAGED CARE PLAN NAME/ISSUING STATE			
<b>12. CERTIFICATION, RELEASE, AND ASSIGNMENT</b>							
a. I certify that the information on this form is true and accurate to the best of my knowledge. Falsification of information is covered by Title 18, United States Code, Section 1001, which provides for a maximum fine of \$250,000 or imprisonment for five years, or both.							
b. I acknowledge that the authority to bill third party payers has been conveyed to the medical facility within the Department of Defense by Title 10, United States Code, Sections 1095 and 1079b, and that no personal entitlement to reimbursement or payment has been granted to me by virtue of this act.							
c. NON-DoD PATIENTS: I authorize and request that the proceeds of any and all benefits be paid directly to the MTF for healthcare services provided me and/or my minor dependents. ACKNOWLEDGEMENT: I hereby agree to pay for any service not covered in whole or in part by my third-party insurer.							
d. NON-DoD MEDICARE PATIENTS: I acknowledge I am responsible for full payment of any services not covered by Medicare, including but not limited to patient copayments and deductibles.							
e. DoD BENEFICIARIES: I hereby acknowledge that the proceeds of any and all benefits shall be paid directly to the facility of the Uniformed Service for services provided me and/or my family member.							
f. ALL PATIENTS: I authorize portions of my medical records necessary to support claims for reimbursement for the cost of care rendered to be released to my insurance carriers.							
13a. PATIENT OR ADULT FAMILY MEMBER SIGNATURE						b. DATE (YYYY/MM/DD)	
14a. IF PATIENT REFUSES TO SIGN THIS FORM: MTF REPRESENTATIVE SIGNATURE						b. DATE (YYYY/MM/DD)	
<b>15. ANNUAL PATIENT INSURANCE VERIFICATION</b>							
a. If any information on this form has changed, a new form must be completed and signed. Otherwise, after initial signature, verify with your initials and date at least annually.							
b. I certify that the information on this form has been verified on the date(s) specified below, and that all information is true and accurate to the best of my knowledge.							
16a. SIGNATURE ( <i>Patient or Adult Family Member</i> )						b. DATE (YYYY/MM/DD)	
17. VERIFICATION		(2) INITIALS		(2) INITIALS		(2) INITIALS	
a. (1) DATE (YYYY/MM/DD)		b. (1) DATE (YYYY/MM/DD)		c. (1) DATE (YYYY/MM/DD)		d. (1) DATE (YYYY/MM/DD)	

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## TRICARE® Beneficiaries Departing Japan

TRICARE Management Activity assures TRICARE beneficiaries affected by the situation in Japan that their health care benefits will be maintained and service and support will continue during this difficult time. Even if relocated, beneficiaries enrolled in TRICARE Overseas Program (TOP) Prime may still access their Prime benefit. Retirees and non-command sponsored beneficiaries will continue to have the TOP Standard benefit. Please visit [www.tricare.mil/tsunami](http://www.tricare.mil/tsunami) or call the appropriate phone number below for additional information regarding your TRICARE benefit.

### GETTING CARE

**Emergency Care.** In an emergency, go to the nearest emergency care facility. After receiving care, call your TOP Regional Call Center (*see below*) before leaving the facility if possible, or during the next business day.

**Routine, Urgent, or Specialty Care.** If your new location is near a military treatment facility (MTF), you may contact the MTF to obtain care. To locate an MTF, visit [www.tricare.mil/mtf](http://www.tricare.mil/mtf). In other locations, contact your TOP Regional Call Center at the telephone numbers

below for information on receiving care. If for any reason you cannot access your TOP Regional Call Center, contact the TRICARE contractor (*listed below*) for the region where you have relocated.

**Prescription Medications.** TOP Prime beneficiaries needing replacement or refill medications may contact any local MTF to have prescriptions filled. The TRICARE Pharmacy Operations Service Center at 1-866-275-4732 can also assist with filling prescriptions at a TRICARE retail network pharmacy. For TRICARE Pharmacy Home Delivery (*mail order*) call Express Scripts, Inc. at 1-877-363-1303.

**Dental Care.** If you have dental care needs, please contact the TRICARE Dental Program or TRICARE Retiree Dental Program (*listed below*).

**Stress Management.** Concerns about stress may be directed to counselors at TRICARE Assistance Program (TRIAP) or Military OneSource. For more information about TRIAP visit [www.tricare.mil/triap](http://www.tricare.mil/triap). For more information about Military OneSource call 1-800-342-9647.

### FOR INFORMATION AND ASSISTANCE

<p>TRICARE Overseas Stateside TOP Regional Call Center 1-877-451-8659</p> <p>Pacific TOP Regional Call Centers Singapore: +65-6339-2676 Sydney: +61-2-9273-2710</p> <p>Visit <a href="http://www.tricare-overseas.com">www.tricare-overseas.com</a> for toll-free numbers worldwide.</p>	<p>TRICARE Pharmacy Operations Service Center 1-866-275-4732</p> <p>TRICARE Pharmacy Program Express Scripts, Inc. 1-877-363-1303 <a href="http://www.express-scripts.com/TRICARE">www.express-scripts.com/TRICARE</a></p>	<p>TRICARE Dental Program 1-800-866-8499 (<i>if stateside</i>) 1-888-418-0466 (<i>if overseas</i>) <a href="http://www.TRICAREdentalprogram.com">www.TRICAREdentalprogram.com</a></p> <p>TRICARE Retiree Dental Program 1-888-838-8737 <a href="http://www.trdp.org">www.trdp.org</a></p>
<p>TRICARE North Region Health Net Federal Services, LLC 1-877-TRICARE (1-877-874-2273) <a href="http://www.hnfs.com">www.hnfs.com</a></p>	<p>TRICARE South Region Humana Military Healthcare Services, Inc. 1-800-444-5445 <a href="http://www.humana-military.com">www.humana-military.com</a></p>	<p>TRICARE West Region TriWest Healthcare Alliance Corp. 1-888-TRIWEST (1-888-874-9378) <a href="http://www.triwest.com">www.triwest.com</a></p>

*For additional information, please visit [www.tricare.mil/tsunami](http://www.tricare.mil/tsunami).*

## CFAY Narita Shuttle Bus Services Narita Airport DOD Liaison Desk Location

### Terminal 1

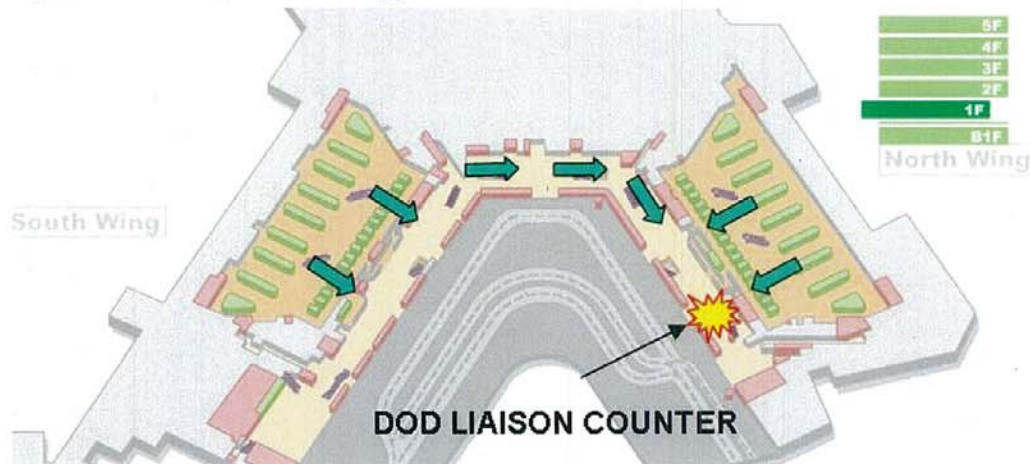
#### From North Wing

After departing customs (northern wing), look left across the corridor and you will see the DoD Liaison counter to the left of the N2 Exit. See diagram of Terminal 1 below.

#### From South Wing

After departing customs turn left and walk down the corridor until you see DOD Liaison counter located on the right side just pass the N2 exit. See diagram of Terminal 1 below.

#### Map of Terminal 1 (Arrival Lobby)



### Terminal 2

Upon departing Customs, go outside to bus stop 8 or 18. Catch a free shuttle that runs every 15 to 20 minutes to Terminal #1. At Terminal 1, get off at the Arrival Area on the street level. Enter the terminal, turn right, and the DOD Liaison counter will be located just pass the N2 exit.

## **APPENDIX II**

### **WEBSITES/REFERENCES**

#### **The All Partners Network (APAN):**

[https://community.apan.org/hadr/japan\\_earthquake/p/dependents.aspx](https://community.apan.org/hadr/japan_earthquake/p/dependents.aspx)

This website is meant to be a one-stop source for the family members departing Japan. The APAN provides for effective information exchange and collaboration between the United States Department of Defense and any external country, organization, agency or individual that does not have ready access to traditional DOD systems and networks.

#### **Embassy of the United States Tokyo Japan:**

<http://japan.usembassy.gov/>

#### **U.S. Forces Japan:**

<http://www.usfj.mil/>

#### **Commander, Navy Region Japan/Commander, Naval Forces Japan:**

<https://www.cnic.navy.mil/Japan/index.htm>

Acts as Navy representative and coordinator in our area of responsibility, executes shore installation management, and promotes operability and conducts liaison with the Japan Maritime Self Defense Force.

#### **Commander, Navy Region Japan/Commander, Naval Forces Japan Facebook:**

<http://www.facebook.com/naf.atsugi#!/COMNAVFORJAPAN>

#### **Commander, Fleet Activities Yokosuka (CFAY):**

<https://www.cnic.navy.mil/Yokosuka>

CFAY's mission is to maintain and operate base facilities for the logistic, recreational, administrative support and service of the U.S. Naval Forces Japan, U.S. SEVENTH Fleet and other operating forces forward-deployed in the Western Pacific.

#### **Naval Air Facility Atsugi (NAFA):**

<https://www.cnic.navy.mil/Atsugi>

Support the combat readiness of Carrier Air Wing FIVE, HSL-51 and tenant commands stationed at NAF Atsugi. Provide logistic support, coordination and services to units assigned to the Western Pacific. Provide for the health, welfare and quality of life for all personnel while enhancing community relationships through respect, fellowship, and charitable events throughout the local communities.

#### **Naval Air Facility Misawa (NAFM):**

<https://www.cnic.navy.mil/Misawa>

The Mission of Naval Air Facility Misawa is to maintain and operate facilities on a joint, multi-national installation in order to provide logistical support and materiel services to permanent, deployed and transient units of the United States Navy and Marine Corps operating throughout Northern Japan and across the Pacific Theater.

**Navy Family Accountability and Assessment System (NFAAS)**

<https://navyfamily.navy.mil>

Standardizes a method for the Navy to account, manage, and monitor the recovery process for personnel and their families affected and/or scattered by a wide-spread catastrophic event. The NFAAS provides valuable information to all levels of the Navy chain of command, allowing commanders to make strategic decisions which facilitate a return to stability.

**CFAY website includes an Online Sign-Up link for Space Available travelers who cannot readily contact the Bus Office:**

<https://www.cnic.navy.mil/Yokosuka/Relocation/NaritaBusSignUp/index.htm>

**Yokohama City Air Terminal** (Information for Negishi, Yokohama residents on how to use the Yokohama City Air Terminal limousine or bus service to Narita International Airport):

<https://www.cnic.navy.mil/Yokosuka/Relocation/NaritaBusSignUp/YCAT/index.htm>

**The following website provides information for returning with your pets:**

1. Japan District Veterinary Command (JDVC):

[http://www.usarj.army.mil/organization/vet/r\\_doc.aspx](http://www.usarj.army.mil/organization/vet/r_doc.aspx)

2. Animal Quarantine Service Website: <http://www.maff.go.jp/aqs/english/index.html>

3. United States Department of Agriculture (USDA) Animal and Plant Health Inspection Service website: [http://www.aphis.usda.gov/animal\\_health/area\\_offices/](http://www.aphis.usda.gov/animal_health/area_offices/)

### APPENDIX III

#### LIST OF ABBREVIATIONS

<b>AQS</b>	Animal Quarantine Services
<b>BAS</b>	Basic Allowance for Subsistence
<b>CDC</b>	Child Development Center
<b>CDH</b>	Child Development Home
<b>CFAY</b>	Commander, Fleet Activities Yokosuka
<b>COLA</b>	Cost of Living Allowance
<b>CPC</b>	Command Pass Coordinator
<b>CTO</b>	Commercial Travel Office
<b>DAL</b>	Designated Alternate Location
<b>DoD</b>	Department of Defense
<b>DoDEA</b>	Department of Defense Education Activity
<b>DoS</b>	Department of State
<b>EAD</b>	Evacuation Allowance Determination
<b>EFM</b>	Eligible Family Member(s)
<b>FAC</b>	Family Assistance Center
<b>FFSC</b>	Fleet and Family Support Center
<b>FSA</b>	Family Separation Allowance
<b>HRO</b>	Human Resources Office
<b>JFTR</b>	Joint Federal Travel Regulations
<b>JTR</b>	Joint Travel Regulations
<b>LQA</b>	Living Quarters Allowance
<b>M&amp;IE</b>	Meals and Incidental Expenses
<b>MTF</b>	Military Treatment Facility
<b>MWR</b>	Morale, Welfare and Recreation
<b>NAFA</b>	Naval Air Facility Atsugi
<b>NAFM</b>	Naval Air Facility Misawa
<b>NAVPTO</b>	Navy Passenger Transportation Office
<b>NFAAS</b>	Navy Family Accountability and Assessment System
<b>OHA</b>	Overseas Housing Allowance
<b>PAL</b>	Post Allowance
<b>PCS</b>	Permanent Change of Station
<b>POV</b>	Privately Owned Vehicle
<b>PRR</b>	Passenger Reservation Request
<b>PDS</b>	Permanent Duty Station
<b>SECNAV</b>	Secretary of the Navy
<b>TPC-HR</b>	Travel Processing Center – Hampton Roads, VA
<b>TQSA</b>	Temporary Quarters Subsistence Allowance
<b>UB</b>	Unaccompanied Baggage

